

## **Application Data Sheet**

### **Application Information**

|                                  |                        |
|----------------------------------|------------------------|
| Application Type::               | Regular                |
| Subject Matter::                 | Utility                |
| Suggested Group Art Unit::       | N/A                    |
| CD-ROM or CD-R?::                | None                   |
| Sequence submission?::           | None                   |
| Computer Readable Form (CRF)?::  | No                     |
| Title::                          | ROOT MANAGEMENT SYSTEM |
| Attorney Docket Number::         | APPLIED 3.0-008        |
| Request for Early Publication?:: | No                     |
| Request for Non-Publication?::   | No                     |
| Suggested Drawing Figure::       | 2                      |
| Total Drawing Sheets::           | 7                      |
| Small Entity?::                  | Yes                    |
| Petition included?::             | No                     |
| Secrecy Order in Parent Appl.?:: | No                     |

### **Applicant Information**

|  |                |
|--|----------------|
| Applicant Authority Type::             | Inventor       |
| Status::                               | Full Capacity  |
| Given Name::                           | Edward         |
| Middle Name::                          | G.             |
| Family Name::                          | Gatliff, Ph.d. |
| Name Suffix::                          | Ph.d.          |
| City of Residence::                    | Hamilton       |
| State or Province of Residence::       | OH             |
| Country of Residence::                 | US             |
| Street of mailing address::            | 7355 Dixon Dr. |
| City of mailing address::              | Hamilton       |
| State or Province of mailing address:: | OH             |

Postal or Zip Code of mailing address:: 45011

**Correspondence Information**

Correspondence Customer Number:: 000530

**Representative Information**

Representative Customer Number:: 000530

**Domestic Priority Information**

| Application::    | Continuity Type::                                       | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | An application claiming the benefit under 35 USC 119(e) | 60/453,463           | 03/10/03             |